

NASA HEALTH PROMOTION AND WELLNESS COMMITTEE

Minutes for: December 7, 2006

Attendance: "X" means present

ARC	<input type="checkbox"/>	HQ	<input checked="" type="checkbox"/>	DFRC	<input checked="" type="checkbox"/>
JPL	<input type="checkbox"/>	DYN	<input checked="" type="checkbox"/>	GSFC	<input checked="" type="checkbox"/>
JSC	<input checked="" type="checkbox"/>	KSC	<input checked="" type="checkbox"/>	MSFC	<input checked="" type="checkbox"/>
GRC	<input checked="" type="checkbox"/>	SSC	<input checked="" type="checkbox"/>	WFF	<input checked="" type="checkbox"/>
LRC	<input checked="" type="checkbox"/>	MAF	<input checked="" type="checkbox"/>	WSTF	<input checked="" type="checkbox"/>

Motivation for Exercise and Health

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NIOSH funded Education and Research Center

Working Well Initiative

Since 1991, the School of Nursing has become the provider of OH services to the City of Birmingham. The services are titled the Good Health Program and have received several honors and awards.

In 1997, the School of Nursing became the provider of a nurse practitioner-managed workers' compensation clinic as well.

The Good Health Program offers general health promotion activities as well as a range of interventions targeted to high risk employees.

The Program offers the following elements:

- 1) Annual health screening and health risk appraisal (HRA) to the high risk occupations such as fire and police. Others are offered the screening and HRA every other year.
- 2) Services are offered during scheduled work hours. The employee can opt out of the annual screening however they have to provide similar information sent in by their private physician.
- 3) Height, weight, waist circumference, cholesterol, blood pressure, blood glucose, HgbA1c and vision are some of the assessed indicators.
- 4) Firefighters have annual hearing and pulmonary function screening.
- 5) Firefighters and police also have annual physical fitness testing (Fit√Check) composed of strength, aerobic capacity, and flexibility measures.
- 6) An annual six-weeks "Back School" for back-injured employees is offered; additional training courses on back safety are offered to targeted departments.
- 7) Variety of exercise classes are offered to the employees and their spouses.
- 8) Personal trainers are at the fitness center
- 9) Noon talks are a favorite activity.

- 10) Monthly tip sheets & posters are offered.
- 11) Payroll stub announcements are sent out.
- 12) Counseling services of a registered dietitian is included.
- 13) Counseling and case management services of a nurse practitioner are offered.
- 14) Active+ is a targeted intervention, so is Eat Smart
- 15) EAP services are offered through a contract.

The City has 160 worksite. The Good Health Program has one W/C clinic and one fitness center that are centrally located. Every Fire and Police location is equipped with exercise equipment. The Registered Dietitian travels through all worksites. Contact is kept with the employees during screenings and physicals. At each screening, five years of data is available for comparison.

Two health issues common to this employee population are 1) uncontrolled hypertension and 2) obesity. During screenings staff spends time to diligently address employees at risk. Primary MDs that are not doing enough to address these problems may be contacted. Target interventions are planned based on the HRA and screening data.

When actual costs were compared to forecasted costs, the City of Birmingham had saved millions of dollars over a five year period. As of 2004, medical insurance costs remain stable at 41.3% of the benefits budget as compared to 40.2% of the budget in 1985 and 12.6% of the payroll compared to 11.6% of the payroll in 1985.

In summary the goals and objectives of the Good Health Program are:

1) Reduce prevalence of chronic diseases

- To screen all employees a minimum of every other year to identify risks to good health.
- To provide targeted interventions and case management for employees with BMI > 30 or at high risk based on waist circumference (Males: > 40 inches; Females: > 35 inches).
- To provide targeted interventions and case management for employees with uncontrolled hypertension and/or elevations in glucose and cholesterol.

2) Promote healthy lifestyles to enhance well-being

- To provide a health awareness program using print and electronic media to
 - Increase employees' knowledge of health risks,
 - Provide risk-reduction strategies and
 - Educate employees about available health resources.

- To provide an easily accessible employee fitness center with qualified trainers, state of the art aerobic and weight training equipment, individual training and group exercise, yoga, and aerobic classes.
- To offer nutrition counseling on an individual and group basis to assist employees in efforts to improve their health habits.

Determinants of Employee Participation in Physical Activity

A review of 11 published articles on employee participation in physical activity was published in the American Association of Occupational Health Nurses' Journal, June 2006, 54, 249-261.

The following is a summary of the article:

- 1) Offer intervention programs designed to enhance perception of physical self-efficacy or the belief that exercise programs can be accomplished. Use employee testimonials and awards and offer beginner classes and variety in sports, dancing, aerobics etc.
- 2) Intervention programs should be directed towards helping employees understand the benefits of physical activity such as our Active + Program.
- 3) Offer classes on self-care and health promotion that promote the belief that employees have personal control of their health such as Noon Talks or Eat Smart

NASA is providing EmbodyHealth A MayoClinic comprehensive e-health package with a Health Risk Assessment Cathy Angotti RD, LD Director, Occupational Health Program

In an effort to obtain trend report and data on the health and productivity of our employees, the Office of the Chief Health and Medical Officer has signed a one year contract with MayoClinic to provide a complete e-health package including access to their EmbodyHealth portal and the Health Risk Appraisal. Both the site and the HRA are set to launch simultaneously on January 23, 2007. During the first three-months we will be offering an incentivized campaign in order to encourage registration and completing of the HRA. The issue of the incentive is still pending a decision from NASA legal. Nonetheless, the campaign to promote the site and participation in the HRA will be intense for the first three months. The remainder of the year, the HRA will remain open to the new employees and to those employees who did not take advantage of the HRA during the campaign period. The HRA can be taken once a year. The e-health package is available to all NASA Civil Servants, their spouse or significant other and adult children over the age of 18. Site and HRA usage are confidential and requires a valid email and

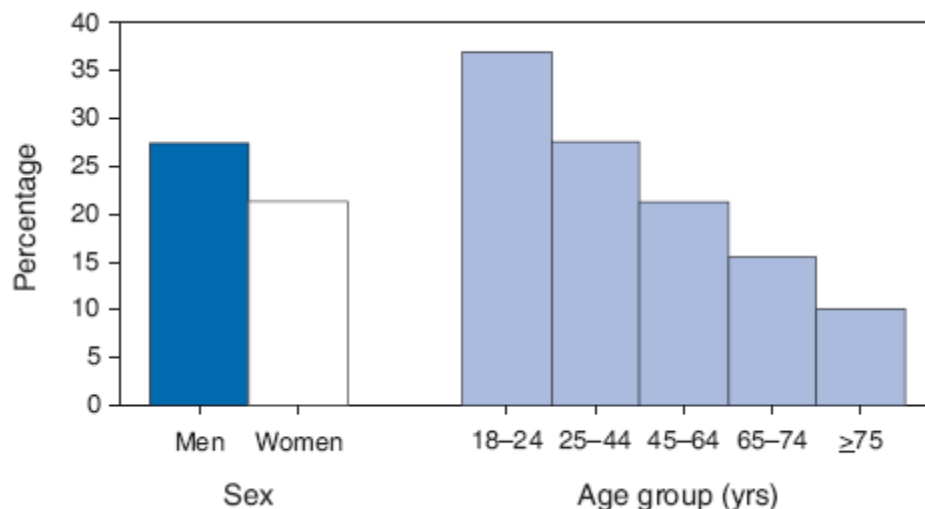
unique identification. From MayoClinic, NASA will only obtain aggregate data to better plan its OH programs and targeted interventions. NASA is taking advantage of all offered customization features in order to give EmbodyHealth the NASA “look and feel”. For example, we are including between one to five customized questions as well as an 8-question Work Limitation Questionnaire that was developed by Tuft University. These questions are approved by the FDA as a reliable and valid tool for outcome measures with the intent to assess the affect of health and illness on employee productivity. Access to EmbodyHealth will be from the ohp website to give more visibility to the office and the OH program.

More information is forthcoming as the date and material are confirmed.

FYI....



QuickStats: Percentage of Adults* Who Engaged in Any Leisure-Time Strengthening Activity,[†] by Sex and Age Group --- United States, 2005



* Aged ≥ 18 years. [†] Data are based on household interviews of a sample of the civilian, noninstitutionalized population. Participants were asked: "How often do you do leisure-time physical activities specifically designed to strengthen your muscles such as lifting weights or

doing calisthenics?" In 2005, approximately one fourth of all adults reported participating in any leisure-time strengthening activity, a component of overall physical fitness. Men were more likely than women to engage in leisure-time strengthening activities. The percentage of adults who engaged in these activities decreased with age, from 37% among persons aged 18--24 years to 10% among persons aged ≥ 75 years. **SOURCE:** National Health Interview Survey, 2005. Available at <http://www.cdc.gov/nchs/nhis.htm>.